Opinion

Guest Voices



Transgender rights supporters rally at the Lutheran Church of the Reformation on Capitol Hill, June 18, 2025, in Washington after the Supreme Court upheld Tennessee's ban on gender-affirming care for transgender minors. (AP/Jose Luis Magana)



by Maxwell Kuzma

View Author Profile

Join the Conversation

Send your thoughts to *Letters to the Editor*. Learn more

June 25, 2025

Share on BlueskyShare on FacebookShare on TwitterEmail to a friendPrint

The consensus among major medical associations—including the American Academy of Pediatrics, the American Medical Association and the Endocrine Society—is clear: Gender-affirming care is evidence-based, life-saving and developmentally appropriate when guided by professionals in collaboration with families. Trans medicine is not up for debate in peer-reviewed journals or at the bedside of compassionate doctors. But our health care is repeatedly dragged into bad-faith political attacks disguised as legal nuance.

I am a transgender man and lifelong Catholic who knows what it means to live at the intersection of faith, identity and marginalization. And I'm telling you: There is nothing neutral about legitimizing pseudoscience, stoking fear over trans existence, and invoking "reasonable concern" while transgender youth are under legislative siege.

The U.S. Supreme Court's recent decision upholding Tennessee's ban on puberty blockers and hormone therapy for transgender teenagers sidesteps much of the scientific debate while implicitly legitimizing pseudoscience.

The case raised foundational constitutional questions — whether transgender people are a protected class, whether such bans violate equal protection, and whether the Constitution guarantees access to necessary medical care — but the Court avoided answering them. Instead, it carved out a narrow exception permitting medical discrimination based on "gender dysphoria," effectively greenlighting care bans nationwide and paving the way for broader restrictions.

Michael Sean Winters on June 20 engaged the scientific debate in an opinion piece that leans heavily on what is known as the Cass Report. Winters' column cites the Cass Report as though it offers a settled, comprehensive scientific assessment.

Never mentioned is that the Cass Review has been widely critiqued for its methodological flaws, biased framing, and the political context in which it was created. The seven systematic reviews by Cass demonstrated a remarkably weak evidence base underpinning current practice in the care of children with gender-related distress. Multiple international medical bodies have reaffirmed their support for gender-affirming care in the aftermath.

Advertisement

Yet Winters presents Cass as a corrective to what he calls "diagnostic overcrowding," suggesting that transgender youth are just troubled kids with other issues who need to be slowed down or stopped. This framing is medically inaccurate.

Winters invokes Sarah McBride's interview with The New York Times' Ezra Klein. McBride, the first transgender member of Congress, recently sat down with Klein for an interview that many well-meaning liberals shared as a model of measured trans advocacy. But as journalist and transgender woman Erin Reed pointed out in her sharp critique, the interview functioned more as political cover for those urging Democrats to retreat from trans rights than as a defense of our community.

McBride suggested that trans people may have "overplayed our hand," that we need to moderate our demands and meet the public "where they are." But justice has never waited for the public to catch up. If it had, interracial marriage would still be illegal in half the country.

The cruelty is not abstract. As the Supreme Court was ruling in favor of Tennessee's ban on care for trans youth, the federal government removed LGBTQ suicide hotline resources. At a time when trans youth are losing access to affirming care, support and now even visibility in federal crisis intervention tools, this ruling amounts to further violence against this marginalized community. These decisions are not happening in a vacuum. They are coordinated acts of erasure, and they are causing people emotional trauma.

Catholicism has the resources — spiritual, intellectual, communal — to confront injustice with clarity and compassion. I still believe that. But that belief requires accountability. It requires us to call things what they are. And it requires the courage to say, without qualification: Trans people are not a threat to be managed. We are not a controversy to be explained away. We are beloved, we are sacred, and we deserve better than this. And we deserve a community that recognizes our full humanity — not in word only, but in action.

In his autobiography, *Hope*, published earlier this year, Pope Francis wrote: "Everyone in the Church is invited, including people who are divorced, including people who are homosexual, including people who are transgender."

The invitation has been extended. The only question now is who will dare to answer it — not with conditions or caveats, but with open doors, open hearts, and the conviction that inclusion and justice are not optional in a faith rooted in love.